



Park Prescription Program Qualitative Survey for Participants

To better understand the outdoor spaces and communities in *[insert your location]*

- 1) Age:
- 2) Race:
- 3) Sex:
- 4) Ethnicity:
- 5) Neighborhood:
- 6) Number of people in household, age/sex:

Please circle the response that most closely resembles your answer:

- 7) Is your household eligible for the free lunch program?

Yes No Not Applicable

- 8) I feel like I can take action to improve my health

Yes No

- 9) Being outside makes me healthier

Yes No

- 10) On a scale of 1-10 (1 being unhealthy and 5 being in perfect health) please rate your current health

1 2 3 4 5

- 11) I spend time at a park in *[insert your city]*:

Once a day Once a week Once a month Once a year Never

- 12) I spend time at a park outside of *[insert your location]* in *[your county]*:

Once a day Once a week Once a month Once a year Never

Please rank your response from 1-4 (1 being the most important, 4 being the least important):

- 13) I would spend more time in parks in *[insert your location]* if...

___ transportation was more accessible



- someone was there to welcome me
- I knew where they were and what to do there
- they were safer

14) I would spend more time in parks outside of *[insert your location]* in *[insert larger geographic region]* if...

- transportation was more accessible
- someone was there to welcome me
- I knew where they were and what to do there
- they were safer

15) Which park do you visit the most in *[insert your location]* and why?

16) Which community resources do you use to find outdoor activities, if any?

17) What are your favorite outdoor activities?

This tool is adapted from
Southeast Health Center Park Prescriptions Training,
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by:

San Francisco Recreation and Parks Department
Healthy Parks Healthy People: Bay Area
San Francisco Department of Public Health
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Institute at the Golden Gate
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